

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/591798

FILING DATE

14 APR 2007

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
	1					
2						
3						
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20						
21						
22						
23						
24						
25			1			
26						
27			1			
28						
29			1			
30						
31			1			
32						
33			1			
34						
35			1			
36						
37			1			
38						
39			1			
40						
41			1			
42						
43			1			
44						
45			1			
46						
47			1			
48						
49			1			
50						
TOTAL IND.	1		1			
TOTAL DEP.	23	23	31	31		
TOTAL CLAIMS	24		32			

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
	51				1	
52					1	
53					1	
54					1	
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						